PART B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE

Complete and send this form, together with applicable fee(s), to: Mail

· · · · · · · · · · · · · · · · · · ·	4		or <u>F</u>	P. Al <u>ax</u> (70	03) 746-4000	ginia 22313-1450	V
NSTRUCTIONS: This for appropriate. All further condicated unless corrected maintenance fee notification	rm should be used for tran rrespondence including the below or directed otherwise ns:	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and Prders and notifical specifying a	UBLICAT ication of new corre	TON FEE (if requirements fees visions)	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
7: Robert B. O'Rou	OLOFF, TAYLOR & Z	(FEB 10	2005 ha	e(s) Transmittal. The lers. Each additionate its own certificate Cereby certify that the service of the lers Postal Service.	is certificate cannot be used al paper, such as an assignme e of mailing or transmission. rtificate of Mailing or Tran its Fee(s) Transmittal is beir with sufficient postage for fi	
Los Angeles, CA 9	00025-1026			1 /	Angela M	Quinn	(Depositor's name)
	•			<u> </u>	MYUL		(Signature)
				L	February	8, 2005	(Date)
APPLICATION NO.	FILING DATE	****	FIRST NAMED	INVENTO	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/837,702	04/17/2001		Conor J. M	AcNally		04148P018	9145
	IETHOD AND APPARATU						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBL	ICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$137			\$300	\$1670 T	02/22/2005
EXAM	MINER	ART UN	NIT	CLAS	S-SUBCLASS	J	
KIM, I	KEVIN	2634	1	37	5-317000		
Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. BLAKELY, SOKOLOFF 1 TAYLOR & ZAFMAN LLE						
	RESIDENCE DATA TO B			-			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appe T a substitute for	ar on the portion or filing ar	patent. If an assign assignment.	nee is identified below, the 02/11/2005 MBERHE1 00	document has been filed for 000085 09837702
(A) NAME OF ASSIGN	EE	(I	B) RESIDENCI	E: (CITY a	DA STATE OR CO	UNTRY) 01 FC:1501	1400.00 OP
CEVA COMM	UNICATIONS LI	MITED	Dub]	·	Ireland	02 FC:1504 03 FC:8001	300.00 OP 30.00 OP
lease check the appropriate	e assignee category or catego				Individual XXC	orporation or other private g	roup entity Government
a. The following fee(s) are	enclosed:	41	b. Payment of F	().). 		
Massue Fee	_		nt of the fee(s) is er				
Publication Fee (No s Advance Order - # or			rd. Form PTO-203		r credit any overnavment to		
Meridianice Order - # 0:	Copies <u>cen (10)</u>		Deposit Acco	unt Numbe	2666 C	(enclose an extra	r credit any overpayment, to copy of this form).
	(from status indicated above MALL ENTITY status. See	•	Dh Annlice	int is no lo	nger claiming SMA	LL ENTITY status. See 37 (CFR 1 27(o)(2)
			• •				cation identified above. the assignee or other party in
_	m				Dota	2/8/05	
Authorized Signature Typed or printed name			Registration	1 No. 36,591			
This collection of information	on is required by 37 CFR 1 3	11 The information	on is required to	o obtain or ection is e on the indi	retain a benefit by	the public which is to file (as	nd by the USPTO to process) ing gathering, preparing, and time you require to complete

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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04148.P018



Patent

N THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:	Art Unit: 2634
Conor J. McNally)	Art Onit. 2034
Serial No.: 09/837,702	Examiner: Kevin Kim
Filed: April 17, 2001)	I hereby certify that this correspondence is being deposite with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450
For: METHOD AND APPARATUS FOR) ACCURATE SLICER THAT CAN) RAPIDLY ADJUST TO AN OFFSET)	on February 8,2005 Date of Deposit Out of Deposit
	Name of Person Mailing Correspondence - 9 - 7 - 5 Signature Date

PAYMENT OF ISSUE FEE

MS ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice of Allowance mailed November 19, 2005, enclosed herewith is a check in the amount of \$1,430.00 for payment of the issue fee (soft copies requested) and publication fee and a check in the amount of \$300.00 for the publication fee.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date:

Michael J. Mallie

Reg. No. 36,591

12400 Wilshire Boulevard Seventh Floor Los Angeles, CA 90025-1026

(408) 720-8598



FEE TRANSMITTAL FOR FY 2005 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). TOTAL AMOUNT OF PAYMENT (\$) 1,730.00 Complete if Known: **Application No.** __09/837,702 Filing Date April 17, 2001 First Named Inventor Conor J. McNally Examiner Name Kevin Kim Art Unit 2634 04148.P018 Attorney Docket No. Applicant claims small entity status. See 37 CFR 1.27. **METHOD OF PAYMENT** (check all that apply) XX Check ____ Credit Card Money Order None Other (please identify) XX___ Deposit Account Deposit Account Number : <u>02-2666</u> **Deposit Account Name:** The Director is Authorized to do the following with respect to the above-identified Deposit Account: Charge fee(s) indicated below. Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application. Charge fee(s) indicated below except for the filing fee Credit any overpayments. Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged. Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Large E		Small I				
Fee	Fee	Fee	Fee			
Code	(\$)	Code	(\$)	Fee Description	~	<u>Fees Paid (\$)</u>
1011	300	2011	150	Utility application filing fee]	
1111	500	2111	250	Utility search fee	≻ 1,000/500	
1311	200	2311	100	Utility examination fee	J	
1012	200	2012	100	Design application filing fee	٦	
1112	100	2112	50	Design search fee	≻ 430/215	
1312	130	2312	65	Design examination fee	100,210	
1312	130	2012	03	besign examination ree	<i></i>	
1013	200	2013	100	Plant filing fee	7	
1113	300	2113	150	Plant search fee	├ 660/330	
1313	160	2313	80	Plant examination fee	J	
1004	300	2004	150	Reissue filing fee	٦	
1114	500	2114	250	Reissue search fee	1,400/700	
1314	600	2314	300	Reissue examination fee	, , , , , , , , , , , , , , , , , , , ,	
10						
1005	200	2005	100	Provisional application filing	fee	
					SUBTOTAL (1) \$	

2. EXCESS CLAIM FEES									
Independ	hest nu dent C hest nu	laims _ Imber of i	otal clair	- 20 or HP = ns paid for, if gre – 3 or HP = lent claims paid t	Extra Claims eater than 20 for, if greater than 3	x x	Fee from below	- = - = - =	<u>Fees Paid (\$)</u>
Fee F Code 1202 1201 1203	Code (\$) Code (\$) Fee Description 1202 50 2202 25 Each claim over 20 1201 200 2201 100 Each independent claim over 3 1203 360 2203 180 Multiple dependent claims, if not paid 1204 200 2204 100 Reissue: each claim over 20 and more than in the original patent								
3. <u>APPLICATION SIZE FEE</u> If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total She	ets	•	Extra S		lumber of each add't O or fraction thereof		<u>Fee fi</u> <u>belov</u>		Fees paid (\$)
		- 100 =		/50 = _	(round up to whole no	umber)	х		
Code (1081 1082 1083	tity Fee (\$) 250 250 250 250	Small E Fee Code 2081 2082 2083 2084	ntity Fee (\$) 125 125 125 125		on: Application size fee 100 sheets (count spec &				
						SUE	BTOTAL (3) \$ __	

FEE CALCULATION (continued)										
4. OTHER FEE(S)										
7. <u>U</u>		<u>-(U)</u>								
			4400 /	/ H (2) P (3)	Fees Paid (\$)					
Non-E	ngiish Spe	cification,	\$130 tee	(no small entity discount)						
Large	Entity	Small E	ntity							
Fee	Fee	Fee	Fee							
Code	(\$)	Code	(\$)	Fee Description						
1051	130	2051	65	Surcharge - late filing fee or oath						
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet						
1053	130	1053	130	Non-English specification						
1812	2,520	1812	2,520	For filing a request for ex parte reexamination						
1813	8,800	1813	8,800	Request for inter parties reexamination						
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action						
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action						
1251	120	2251	60	Extension for reply within first month						
1252	450	2252	225	Extension for reply within second month						
1253	1,020	2253	510	Extension for reply within third month						
1254	1,590	2254	795	Extension for reply within fourth month						
1255	2,160	2255	1,080	Extension for reply within fifth month						
1401 1402	500 500	2401 2402	250 250	Notice of Appeal Filing a brief in support of an appeal						
1403	1,000	2402	500	Request for oral hearing						
1451	1,510	1451	1,510	Petition to institute a public use proceeding						
1452	500	2452	250	Petition to institute a public use proceeding Petition to revive – unavoidable						
1453	1,500	2453	750	Petition to revive - unintentional						
1501	1,400	2501	700	Utility issue fee (or reissue)	1,400.00					
1502	800	2502	400	Design issue fee						
1503	1100	2503	550	Plant issue fee	:					
1462	400	1462	400	Petitions to the Commissioner (CFR 1.17(f) Group I)						
1463	200	1463	200	Petitions to the Commissioner (CFR 1.17(g) Group II)						
1464	130	1464	130	Petitions to the Commissioner (CFR 1.17(h) Group III)						
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)						
1806	180	1806	180	Submission of Information Disclosure Stmt						
8021	40	8021	40	Recording each patent assignment per						
4000	property (times number of properties)									
1809	790	2809	395	For filing a submission after final rejection	•					
1814	130	2814	65	(see 37 CFR 1.129(a)) Statutory Disclaimer						
1810	790	2810	395	For each additional invention to be examined						
1010	, 50	2010	000	(see 37 CFR 1.129(b))						
1801	790	2801	395	Request for Continued Examination (RCE)						
1802	900	1802	900	Request for expedited examination of a design						
				application						
1504	300	1504	300	Publication fee for early, voluntary, or normal pub.	300.00					
1505	300	1505	300	Publication fee for republication						
1803	130	1803	130	Request for voluntary publication or republication						
1808	130	1808	130	Processing fee under 37 CFR 1.17(i) (except provisionals)						
1454	1,370	1454	1,370	Acceptance of unintentionally delayed claim for priority						
Other fee (specify) Fee for 10 copies of Issued Patent 30.00										
										
Other	ee (specii)	y)								
SUBTOTAL (4) \$ 1,730.00										
*Reduced by Basic Filing Fee Paid										
SUBMITTED BY:										
Typed	or Printe	d Name:	<u>Micha</u>	el J. Mallie						
Signature: Date:										
Rea. N	lumber:	36.591		Telephone Number: _408-720-83	300					
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